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Frances Doyle

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Attorney Docket No.: FUJS 18.066 (100794-11568)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor: HIDEAKI WATANABE et al.
Confirmation No.: 9317
Serial No.: 09/735,887
Filed: December 13, 2000
Title: DATA COMMUNICATION SYSTEM ...
Examiner: JOHN SHEW
Group Art Unit: 2664

September 3, 2004

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

SIR:

In response to the Office Action dated June 4, 2004, please amend the subject application

as follows:

11/12/2004 PYARBORD 00000003 501290 09735887
01 FC:1201 86.00 DA

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41315495.01

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

09735887

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	12 minus 20 =	0
INDEPENDENT CLAIMS	5 minus 3 =	2
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
	Total	13	Minus
	Independent	10	Minus
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

SMALL ENTITY TYPE	OTHER THAN OR SMALL ENTITY
RATE	FEES
BASIC FEE	355.00
OR	BASIC FEE
X\$ 9=	710.00
OR	X\$18=
X40=	160
OR	X80=
+135=	270
TOTAL	870
OR	TOTAL

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
	Total	Minus	**
	Independent	Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

SMALL ENTITY OR	OTHER THAN OR SMALL ENTITY
RATE	ADDI- TIONAL FEE
X\$ 9=	
OR	X\$18=
X40=	80
OR	X80=
+135=	270
TOTAL ADDITIONAL FEE	870
OR	TOTAL ADDITIONAL FEE

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
	Total	Minus	**
	Independent	Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
OR		X\$18=	
X40=		X80=	
OR		X80=	
+135=		+270=	
TOTAL ADDITIONAL FEE		TOTAL ADDITIONAL FEE	
OR		OR	

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.